NAME

SCHEDULE W APPORTIONMENT WORKSHEET

SOCIAL SECURITY NUMBER

If income of non-resident taxpayers derived from Delaware sourced employment the State of Delaware, an allowance will be permitted for those days worked outside the ratio of days worked outside of the State versus the total number of Delaware so claimed must be based on necessity of work outside the state of Delaware in performsolely for the convenience of the employee.	of the State. The allowand ourced employment workin	ce will be equivalent to g days. Any allowance	
1. Wages, Salaries, Tips, etc (to be apportioned)			1
2. Total Days in Year (365 or 366)		2	
3. Non-Working Days		1	
Saturdays and Sundays		3a	
Holidays		3b	
Sick Leave		3c	
Vacation		3d	
Other Non-Working Days		3e	
Total Non-Working Days (Sum of lines 3a through 3e above)		3	
4. Total Days Worked in Year (subtract line 3 from line 2)			4
5. Total Days Worked Outside Delaware (from page 2 of this form)		5	
6. Total Days Worked in Delaware (subtract line 5 from line 4)			6
7. Delaware Sourced Income:			
Line 6 ÷ Line 4 %) X	Line 1		7

If you only have one (1) source of employment in Delaware, enter the Delaware Sourced Income (Line 7) onto Form 200-02, page 2, column 2, line 1. If you have more than one (1) source of employment in Delaware, add the Delaware Sourced Income amounts from lines 7 (one form per Delaware source), and enter the Total Delaware Sourced Income on Form 200-02, page 2, column 2, line 1.

SCHEDULE W DAYS WORKED OUTSIDE DELAWARE

NAME	ME SOCIAL SE		SOCIAL SEC	CURITY NUMBER		
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DATE	LOCATION	DATE		LOCATION		

Total Number of Days Worked Outside Delaware =

(REVISED 12/98)